

Patient Feedback / Suggestions For Improvement

Dear Patients,

The doctors and staff at Moana Medical Centre are committed to providing you with a high standard of patient care. Your input helps us to improve our service.

Compliment

Suggestion

Complaint

This concern is regarding my patient care: Yes No

Did you discuss your concern with a member of our staff: Yes No

Please write a brief statement:

Who was involved: _____

When did the issue occur: _____

What happened: _____

Do you have any comments about our practice?

Is there any aspect of our care provision that could be improved?

Thank you for taking the time to provide us with your feedback. Your responses are treated in confidence.

Signed _____

Name (optional) _____

Date of Birth: _____

Address: _____

Telephone: _____ Mobile: _____